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CONFIRMATION NO. 9230

<b>SERIAL NUMBER</b> 09/558,458	<b>FILING OR 371(c) DATE</b> 04/25/2000 <b>RULE</b>	<b>CLASS</b> 426	<b>GROUP ART UNIT</b> 1761	<b>ATTORNEY DOCKET NO.</b> 8026
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**APPLICANTS**  
 David Vincent Zyzak, Cincinnati, OH;  
 Robert Leslie Swaine JR., Glendale, OH;

**\*\* CONTINUING DATA \*\*\*\*\*** *LAW*  
 This appln claims benefit of 60/131,956 04/30/1999 and claims benefit of 60/140,658 06/23/1999  
 and claims benefit of 60/150,935 08/26/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *LAW*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 07/11/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Leslie Swaine</i> <i>LAW</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 1
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**ADDRESS**  
 Calfee, Halter & Griswold LLP  
 1400 McDonald Investment Center  
 800 Superior Avenue  
 Cleveland, OH 44114-2688

**TITLE**  
 Flavor enhancing oils

<b>FILING FEE RECEIVED</b> 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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